Indiana State Police Methamphetamine Laboratory Occurrence Report This form complies with the statutory requirement set forth in IC 5-2-15-3.

Date:	<u>10-11-07</u>	Address:	<u>7861 N CR 475 E</u>	
Case #:	<u>34F33252</u>		Orleans	
County:	Orange		<u>In 47452</u>	
Type of Laboratory Seizure (check onc) Seizure Location (check all that apply)			check all that apply)	
Operation Chemica Dumpsi	al/Glassware/Equipment (only)	☐ Residence ☑ Outbuilding ☐ Vehicle	☐ Hotel/Motel ☑ Open – No Structure ☐ Other:	
Items Found: Location (bedroom, kitchen, open air, etc) (check all that apply)				
Red Phosphorous/Iodine Reaction(s): open air				
Flammable Solvents: open air				
Water Reactive Metal (Lithium): open air				
Anhydrous Ammonia: open air				
Hydrochloric Acid Gas Generatoτ(s): open air				
Corrosive Acid: open air				
Corrosive Base: open air				
Other (item and location);				
Child under age 18 discovered (check one) Yes 2 (number present) No *If yes, fax report to Child Protective Services		☐ Ephedrine ☐ Retail/Met ☐ Other:	Investigative Information Ephedrine/Pseudoephedrine Tracking Log Retail/Merchant Tip Other:	
This report is to be faxed to the following agencies that serve the location:				
Health Depar	tment: Orange Co. VFD Dist 2 tment: Orange Co. ion Service: Orange Co.	Fax: <u>(812) 7</u> Fax: <u>(812) 7</u> Fax: <u>(812) 7</u>	<u>23-7117</u>	
For further information regarding this methamphetamine laboratory, contact [nvestigating Officer: Magill Phone (812) 482-1441]				

This form is to be included with the case file, and a copy sent to the Claudestine Laboratory Team Leader for retention.

This form is to be faxed to the Fire Department, Health Department and/or Child Protective Services Department listed within 24 hours of scene processing.